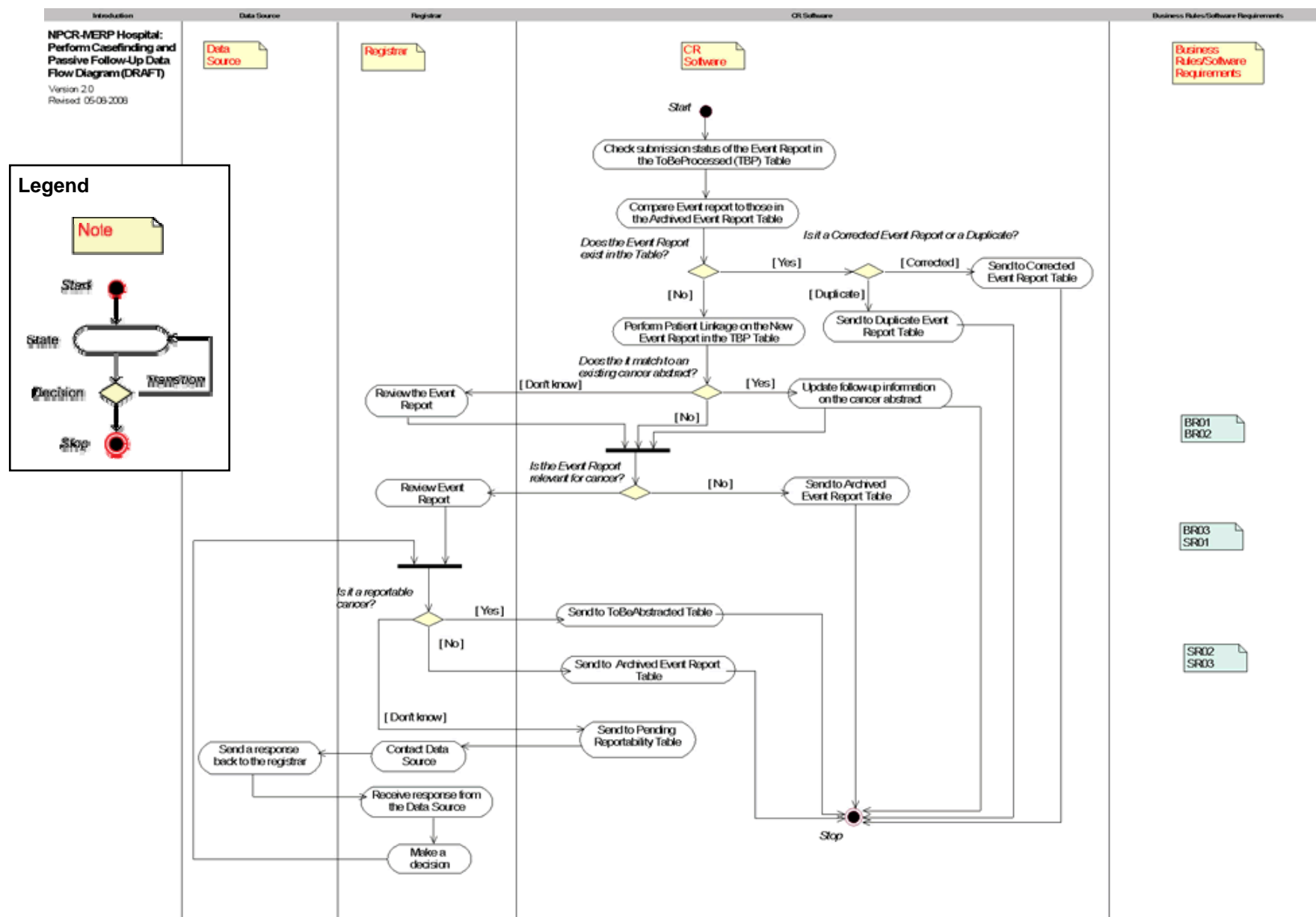


NPCR-MERP Hospital Casefinding Data Flow Diagram

The NPCR-MERP Hospital Casefinding and Passive Follow-Up Data Flow Diagram shows the steps in the automated process from the time the hospital registry receives the event report (from hospital and non-hospital data sources) to the time the hospital registry stores the event report.



There are three actors: the data source, the registrar, and the hospital cancer registry (CR) software.

The process starts when the data source sends an event report to the hospital CR software, which stores the event report in the to-be-processed table. If the event report is a corrected or duplicate report, the software sends it to the appropriate holding table.

The CR software checks to see if the event report belongs to a patient who already exists in the CR database. The registrar performs a review if the software cannot make a determination. If there is a patient match, follow-up information from the event report is added to the existing abstract.

The CR software then determines whether the event report is relevant for cancer. If it is not relevant for cancer, the software sends it to the ArchiveEventReportTable. If it is relevant for cancer, the registrar determines whether the event report is reportable. The registrar may contact the data source to make the determination. The software sends the event report to the ToBeAbstractedTable if it is reportable, or to the ArchivedEventReportTable if it is not reportable.

Business Rules (BR) and Software Requirements (SR)

For details, please refer to the Hospital Casefinding Use Case.

- BR01 and BR03 apply to determining cancer relevance and reportability.
- BR02 applies to adding follow-up information.
- SR01 and SR02 apply to table and data element requirements and to tracking requirements.